

County: _____

Date: _____

Reviewer: _____

Child name: _____ DOB: _____

Intake Coordinator: _____

Activity	Documentation	Yes	No	Special Instruction	Comments
File access	File access list				
File access	File access form				
Referral				Name: Date: Purpose:	
Referral CFR303.321 <i>There is documentation regarding referral</i>	Referral Form			Date: Concern:	
Intake					
Intake <i>There is documentation that intake activities occurred within a timely manner from referral</i>	Initial contact			Date:	
	Consent to proceed				
	Combined enroll				
	CRO 1				
	Parental rights (native lang./ Surrogate)				
Evaluation					
Evaluation <i>There is documentation that evaluation activities occurred in relation to parental concern</i>	Release Provider			Name: Name: Name: Name: Name:	
	Release Medical			Name:	
	Consent to assess <i>Related to concern?</i>			Type: Type:	
	Request for Auth				
	Assess document <i>For each assessment?</i>				
	Physician health <i>Match medical release?</i>				
	Consent <i>Third Party Payer?</i>				

Eligibility					
Eligibility <i>There is documentation that eligibility was determined by a multidisciplinary team utilizing all assessment information, in accordance to parental rights</i>	Written Notice <i>Includes action Proposed/ Refused, Reasons, and Procedural Safeguards?</i>				
	Eligibility Doc <i>Complete with supporting info?</i>			Date: Eligibility Category:	
	Multidisciplinary Team			Type/Method: Type/Method:	
	Parental Signature				
	Health History				
	Multiple Procedures			Type: Type:	
Interim IFSP					
Interim IFSP <i>There is documentation of interim IFSP if required</i>	Documentation of necessity				
	Service Coordinator				
	Service Type			Start date: End date: <i>End date not to exceed 45 days from referral</i>	
	Related Outcome				
IFSP					
Written Prior Notice					
45 Day Timeline					
Section 1 – Identification <i>Are all of the sections complete?</i>					
Section 2 – SC Information <i>Are all of the sections complete?</i>					
Section 3 – Summary of Performance <i>Are all of the sections complete?</i>					
<i>Present levels of performance</i>					
Communication					
Cognition					
Social/Emotional					
Motor					
Adaptive					
<i>Strengths/Needs</i>					
<i>Vision/Hearing/Health</i>					
<i>Relevant Medical</i>					

Section 4 – Family Assessment <i>Is this section completed?</i>		y	n	na		
Family Consent?		y	n	Bk		
If yes, Is there an outcome 6a?						
If yes, does outcome reflect family concerns?						
Section 5 – Transition <i>Is this section completed?</i>		Yes		No		
Are all issues addressed for the child?						
Section 6a – Family Outcome <i>Is this section completed?</i>						
Section 6b – Outcomes <i>Is this section completed?</i>						
Is the outcome measurable?						
Are activities/strategies listed to Adequately achieve the outcome?						
Are individuals responsible listed?						
Section 6c- Service Coordination <i>Is this section completed?</i>						
Is the outcome measurable?						
Are activities/strategies listed to Adequately achieve the outcome?						
Are individuals responsible listed?						
Section 7 – Natural Environments <i>Is this section completed?</i>						
A. Options						
Are multiple sites discussed?						
Are sites selected?						
B. Selection discussion						
Does the site reflect the child's Natural environment?						
C. Justification for site selection						
Is there a justification?						
Section 8 – Services						
Are all sections completed?						
Is there a dated parent signature?						
Is the start date on/after the Signature date?						
Does each service have a related outcome?						
Are all outcomes related to services? <i>IF not, is this appropriate?</i>						
Services	Provider	Consents Yes No		Is location code appropriately reflective of on/off site? Yes No		
Section 9 – Other services <i>Is this section complete?</i>						
Section 10 – IFSP team members						
Does this section reflect all participants and method of participation?						
Is the team multidisciplinary?						
Section 11 – Physician review						
Is this signed by the PCP						
CRO 1 release		Date:				

